



VIA HAND DELIVERY JANUARY 16, 2002

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: SHI et al.

Application Serial No.: 09/972,970

Group Art Unit: 1645

Filed: October 10, 2001

Examiner: Not assigned

For: TM4SF Receptor Polynucleotides,  
Polypeptides and Antibodies

Attorney Docket No.: PT056P1

**RESPONSE TO NOTICE TO FILE MISSING PARTS**

**BOX MISSING PARTS**

Commissioner for Patents  
Washington, D.C. 20231

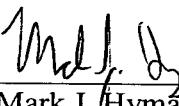
Sir:

In response to the Notice to File Missing Parts mailed November 19, 2001, submitted herewith are: 1) a Fee Transmittal Sheet w. approp. fee (in duplicate); 2) a copy of the Notice; 3) an Executed Declaration (2 pages); and 4) a Supplemental Application Data Sheet (3 pages) for entry into the above-referenced application. Please enter the bibliographic corrections as noted on the Supplemental Application Data Sheet.

The Commissioner is hereby authorized to charge the required fee of \$130.00, and any other fee deemed necessary, to Deposit Account No. 08-3425, as noted on the enclosed Fee Transmittal Sheet.

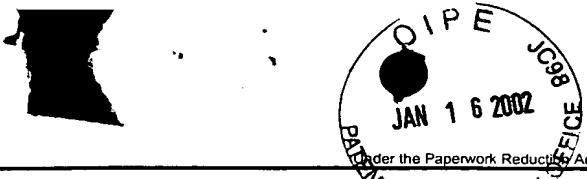
Respectfully submitted,

Dated: January 16, 2002

  
Mark J. Hyman (Reg. No. 46,789)  
Attorney for Applicants

**Human Genome Sciences, Inc.**  
9410 Key West Avenue  
Rockville, Maryland 20850  
(240) 314-1224

KKH/MJH/rmr



Sector 5

PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

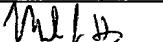
Total amount of payment **\$130.00**

Complete if Known	
Application Number	09/972,970
Filing Date	October 10, 2001
First Named Inventor	SHI et al.
Examiner Name	Not assigned
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METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																																																																																																																																																	
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number <b>08-3425</b></p> <p>Deposit Account Name <b>Human Genome Sciences, Inc.</b></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p>3. <b>ADDITIONAL FEES</b></p> <table border="1"> <thead> <tr> <th>Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>105</td> <td>130</td> <td>205</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td>130.00</td> </tr> <tr> <td>127</td> <td>50</td> <td>227</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>139</td> <td>130</td> <td>139</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>147</td> <td>2,520</td> <td>147</td> <td>2,520</td> <td>For filing a request for <i>ex parte</i> reexamination</td> <td></td> </tr> <tr> <td>112</td> <td>920*</td> <td>112</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>113</td> <td>1,840*</td> <td>113</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>115</td> <td>110</td> <td>215</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>116</td> <td>400</td> <td>216</td> <td>200</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>117</td> <td>920</td> <td>217</td> <td>460</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>118</td> <td>1,440</td> <td>218</td> <td>720</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>128</td> <td>1,960</td> <td>228</td> <td>980</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>119</td> <td>320</td> <td>219</td> <td>160</td> <td>Notice of appeal</td> <td></td> </tr> <tr> <td>120</td> <td>320</td> <td>220</td> <td>160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>121</td> <td>280</td> <td>221</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>138</td> <td>1,510</td> <td>138</td> <td>1,510</td> <td>Petition to institute a public use hearing</td> <td></td> </tr> <tr> <td>140</td> <td>110</td> <td>240</td> <td>55</td> <td>Petition to revive - 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<p>2. <input type="checkbox"/> Payment Enclosed:  <input type="checkbox"/> Check   <input type="checkbox"/> Credit Card   <input type="checkbox"/> Money Order   <input type="checkbox"/> Other*</p>																																																																																																																																																																																																																			
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#### Submitted By

Complete (if applicable)

Name (Print/Type) <b>Mark J. Hyman</b>	Registration No.: <b>46,789</b>	Telephone <b>(240) 314-1224</b>
Signature: 		Date: <b>January 16, 2002</b>

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.



JAN 16 2002  
PATENT AND TRADEMARK OFFICE

**UNITED STATES PATENT AND TRADEMARK OFFICE**

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/972,970	10/10/2001	Yanggu Shi	PT056P1

22195  
HUMAN GENOME SCIENCES INC  
9410 KEY WEST AVENUE  
ROCKVILLE, MD 20850

**CONFIRMATION NO. 6268**  
**FORMALITIES LETTER**



\*OC000000007091461\*

Date Mailed: 11/19/2001

**NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION**

**FILED UNDER 37 CFR 1.53(b)**

***Filing Date Granted***

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 130.

*A copy of this notice **MUST** be returned with the reply.*

*Nguyen*

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

01/22/2002 SDUDNG 00000017 083425 09972970

01 FC:105 130.00 CH

JAN 16 2002  
PATENT AND TRADEMARK OFFICE

# FEE TRANSMITTAL

## for FY 2002

*Patent fees are subject to annual revision.*

*Complete if Known*

Application Number	09/972,970
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First Named Inventor	SHI et al.
Examiner Name	Not assigned
Group Art Unit	1645

Total amount of payment

**\$130.00**

Attorney Docket Number

PT056P1 **COPY OF PAPERS  
ORIGINALLY FILED**

**METHOD OF PAYMENT**

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **08-3425**

Deposit Account Name **Human Genome Sciences, Inc.**

Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17

Applicant claims small entity status.  
See 37 CFR 1.27

2.  Payment Enclosed:

Check  Credit Card  Money Order  Other

**FEE CALCULATION**

**1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370			Utility filing fee	
106	330	206	165			Design filing fee	
107	510	207	255			Plant filing fee	
108	740	208	370			Reissue filing fee	
114	160	214	80			Provisional filing fee	
<b>SUBTOTAL (1)</b>						<b>\$0.00</b>	

**2. EXTRA CLAIM FEES**

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
			-20**	\$18.00	
			-3**	\$84.00	
				<b>\$280.00</b>	

**Large Entity**      **Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid " Reissue independent claims over original patent
108	84	209	42	" Reissue claims in excess of 20 and over original patent
110	18	210	9	
<b>SUBTOTAL (2)</b>				<b>\$0.00</b>

*\*\* or number previously paid, if greater; For Reissues, see above*

**FEE CALCULATION (continued)**

**3. ADDITIONAL FEES**

Fee Code	Large Entity Fee (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
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149	740	249	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	Request for Continued Examination (RCE)	
169	900	169	Request for expedited examination of a design application	
145	100	145	Certificate of correction	
148	110	248	Statutory disclaimer	
561	3	561	Printed copy of patent, regular service	
Other fee (specify):				
Other fee (specify):				
<b>COPY OF PAPERS ORIGINALLY FILED</b>				

\* Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) \$130.00**

**Submitted By**

Name (Print/Type) **Mark J. Hyman**

Registration No.: **46,789**

Complete (if applicable)

Telephone **(240) 314-1224**

Signature:

*Mark J. Hyman*

Date: **January 16, 2002**

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